



The Shrewsbury and  
Telford Hospital  
NHS Trust

# Gender Pay Gap Report 2025



## Introduction



The Shrewsbury and Telford Hospital NHS Trust are one of the region's largest employers. We are proud to have a diverse workforce of 8247 substantive colleagues.

The Shrewsbury and Telford Hospital NHS Trust (SaTH) is the lifeblood for nearly 500,000 people in Shropshire, Telford & Wrekin, and mid Wales, delivering vital district general hospital services.

The majority of our care (99%) takes place across our two major sites: the Princess Royal Hospital (Telford) and the Royal Shrewsbury Hospital (Shrewsbury). From A&E and critical care to diagnostics and inpatient services, both hospitals offer the complete range of acute care our community relies on.

The Trust's People Strategy embeds inclusion and equity at its core, ensuring our workforce reflects the people we treat and cultivate strong healthcare partnerships. We provide a broad array of career opportunities to attract and keep top professionals. Our goal is simple: to create a workplace where every colleague feels valued and supported. Through the consistent review of our gender pay gap, we are proactively addressing inequalities to offer a fair and equitable working environment for everyone.

## **Background.**

Gender pay reporting is mandatory under UK law (Equality Act 2010). This report data illustrates the earnings gap between male and female employees at our organisation.

The gender pay gap shows the difference in the average hourly rate of pay between men and women. A gender pay gap can be driven by several factors including, crucially, underrepresentation of women in senior positions.

We use this information to assess:

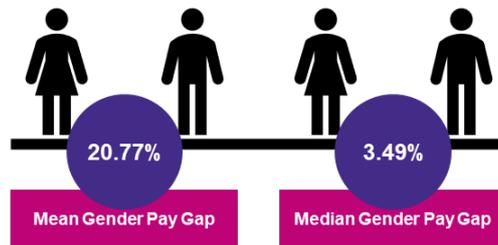
- Gender equality across our workforce
- Representation of men and women at different pay levels
- Our effectiveness in recognising and rewarding talent.

## **Important points of note:**

- **Gender pay gap is not the same as unequal pay.** Equal pay for equal work is a separate legal requirement.
- **Our current records do not include non-binary gender identities.** We fully acknowledge and respect the diversity of gender identities, including non-binary and transgender individuals.
- **The public sector deadline for publication of the data** is 30th March each year, with calculations based on a 'snapshot date' of the previous 31st March.

## **Our headline Gender Pay Gap data**

Our mean gender pay gap is 20.77%. The median gender pay gap is 3.49%. This is inclusive of our Medical and Dental colleagues. This gap is driven primarily by under-representation of women in senior medical roles. Our non-medical workforce gap remains in favour of women.

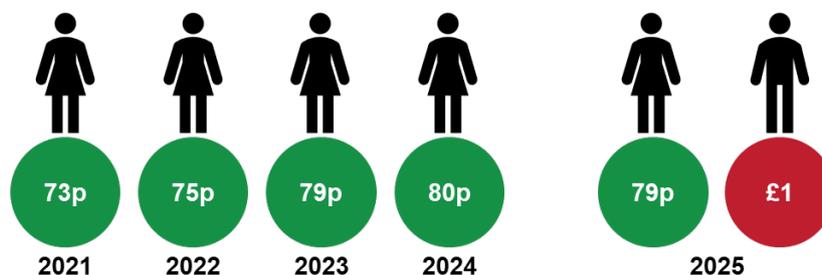


### Mean average Rates of Pay by Gender in The Shrewsbury and Telford Hospital NHS Trust – All staff (inclusive of Medical and Dental)

To calculate the mean pay gap, we add together all the hourly pay rates that women received, divided by the number of women in our workforce. We then repeat this calculation for men. The difference between these figures is the mean gender pay gap.

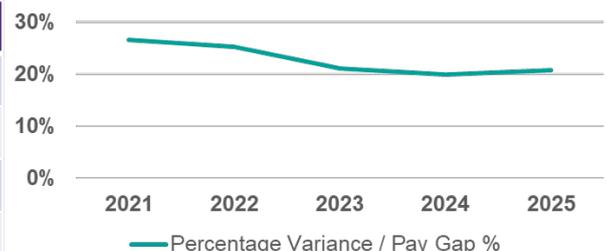
The hourly rate is calculated using "ordinary pay," which includes basic pay, allowances, and shift premium. Our pay rates exceed the national living wage.

**This means women earn 79p for every £1 that men earn when comparing mean hourly pay.**



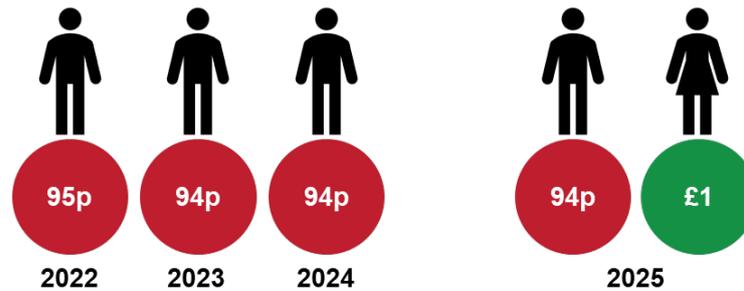
**Our overall mean pay gap has grown in 2025 by 0.85% to 20.77% for all staff. This is equivalent to male colleagues receiving on average 62p per hour more than women.**

	2021	2022	2023	2024	2025
Male	£21.73	£22.23 ↑	£22.13 ↓	£23.05 ↑	£25.10 ↑
Female	£15.97	£16.62 ↑	£17.46 ↑	£18.46 ↑	£19.89 ↑
£ Difference	£5.76	£5.61 ↓	£4.67 ↓	£4.59 ↓	£5.21 ↑
Percentage Variance / Pay Gap %	26.50%	25.24% ↓	21.07% ↓	19.92% ↓	20.77% ↑

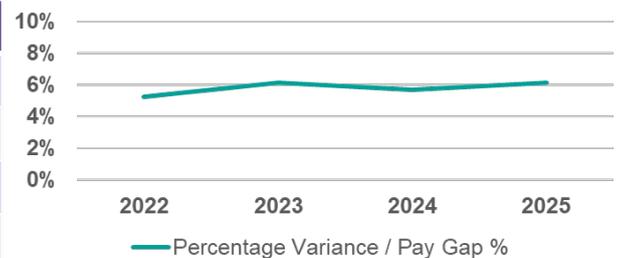


## Mean average Rates of Pay by Gender in The Shrewsbury and Telford Hospital NHS Trust – Excluding Medical and Dental

- Female colleagues in positions that are non Medical and Dental are paid more than their male counterparts and have been for the last 4 years. The overall mean pay gap for non medical colleagues is 6.13% in favour of women and this has increased by 0.46 percentage points (pp) compared with 2024.
- **This means men earn 94p for every £1 that women earn when comparing mean hourly pay.**

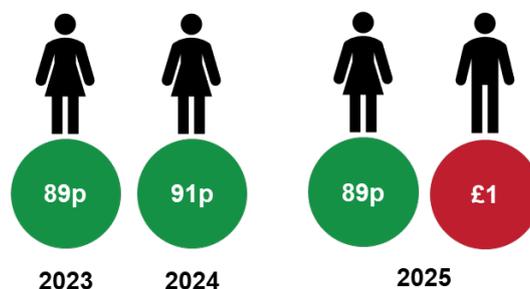


	2022	2023	2024	2025
Male	£14.83	£15.64	£16.57 ↑	£17.61 ↑
Female	£15.65	£16.59	£17.50 ↑	£18.69 ↑
£ Difference	£0.82	£0.96	£0.94 ↓	£1.08 ↑
Percentage Variance / Pay Gap %	5.24%	6.12%	5.67% ↓	6.13% ↑

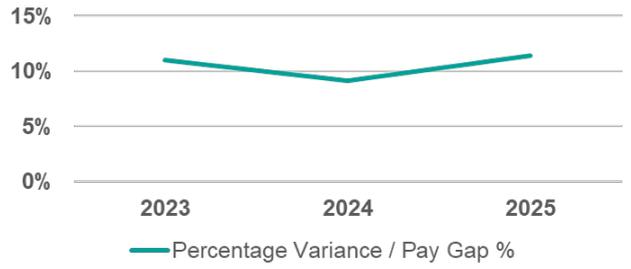


## Mean average Rates of Pay by Gender in The Shrewsbury and Telford Hospital NHS Trust – Medical and Dental only

- The overall mean pay gap for medical and dental colleagues is 11.36% in favour of men and this has increased by 2.2 percentage points (pp) compared with 2024.
- **This means women earn 89p for every £1 that men earn when comparing mean hourly pay on average.**



	2023	2024	2025
Male	£39.63	£40.37 ↑	£44.72 ↑
Female	£35.29	£36.67 ↑	£39.64 ↑
£ Difference	£4.34	£3.70 ↓	£5.08 ↑
Percentage Variance / Pay Gap %	10.96%	9.16% ↓	11.36% ↑

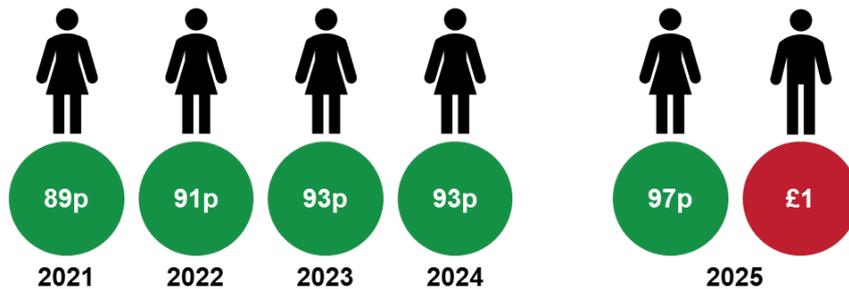


### Median average Rates of Pay by Gender in The Shrewsbury and Telford Hospital NHS Trust – All staff (inclusive of Medical and Dental)

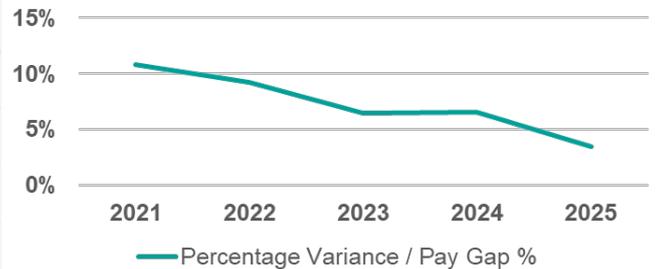
To calculate our median gender pay gap, we first rank all our people by their hourly pay. Then we compare what the woman in the middle of the female pay range received with what the man in the middle of the male pay range received. The difference between these figures is the median gender pay gap.

Our median pay gap has seen a **significant decrease** this year from 6.57% to 3.49%. This equates to a **reduction of 51p year on year**.

**This means women earn 97p for every £1 men earn when comparing the median average**



	2021	2022	2023	2024	2025
Male	£15.65	£16.13 ↑	£16.68 ↑	£17.68 ↑	£18.51 ↑
Female	£13.96	£14.64 ↑	£15.59 ↑	£16.52 ↑	£17.87 ↑
£ Difference	£1.69	£1.49 ↓	£1.09 ↓	£1.16 ↑	£0.65 ↓
Percentage Variance / Pay Gap %	10.82%	9.24% ↓	6.51% ↓	6.57% ↑	3.49% ↓

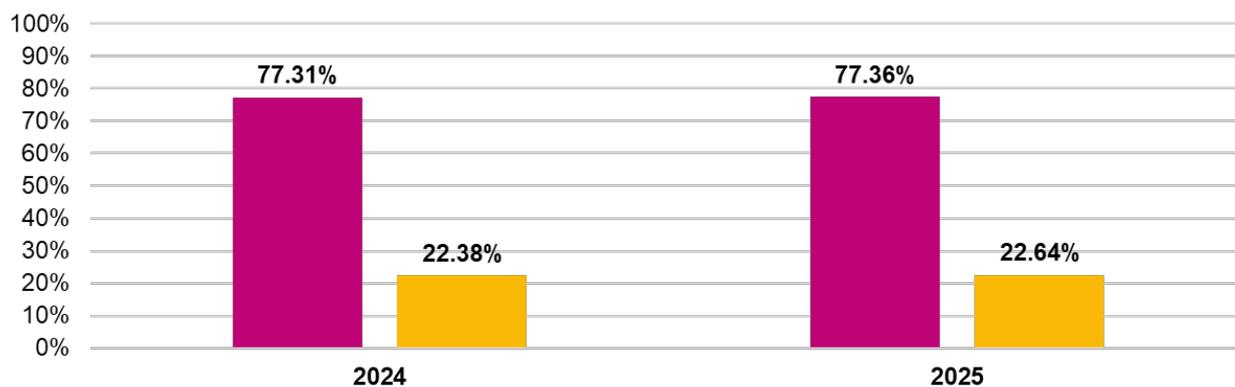


## Understanding our Gap at Shrewsbury and Telford NHS Trust

Our Trust gender profile is 77% female (6350 colleagues) and 23% male (1897 colleagues) detailed in Table 1

Table 1

**Gender Mix in Shrewsbury and Telford Hospital NHS Trust as of 31/03/2025**



	Headcount 2024	Headcount 2025	Percentage 2024	Percentage 2025
Female	6429	6459	77.31%	77.36%
Male	1886	1890	22.68%	22.64%
Total	8315	8349		

### Overall Workforce Gender Split

- The Trust's overall gender profile is 77% female (6,459 colleagues) and 23% male (1,890 colleagues).
- The data reflects a classic NHS pattern: a predominantly female workforce concentrated in the lower to mid-level clinical and support roles, with men disproportionately represented in the highest-paying bands and Non-Agenda for Change (AfC) roles.

### Gender Representation by Pay Band and Quartile

- **Lower and mid-bands (bands 1 through 7):** Women significantly outnumber men, consistently representing over 77% of the staff up to Band 8a. Peak female representation is in Bands 3 and 4, with over 88% female staff in 2025 (see table 2)
- **Highest salaried quartile (quartile 4):** This quartile sees the largest representation of males at 32.72%, an increase of 1.5% since 2024. Women are most highly represented in quartile 3 (see table 3)

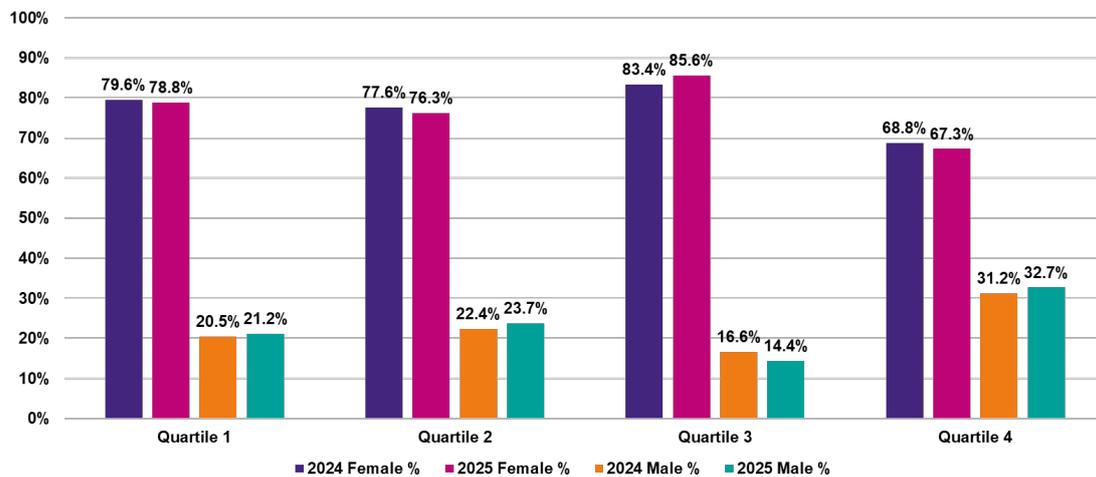
Table 2

Gender Mix at Pay Band Level within The Shrewsbury and Telford NHS Trust as 31/03/2025

	2024 Female	2024 Female %	2024 Male	2024 Male %	2025 Female	2025 Female %	2025 Male	2025 Male %
Band 1	6	66.67%	3	33.33%	6	75%↔	2	25%↓
Band 2	1448	75.03%	482	24.97%	1460	74.53%↓	499	25.03%↑
Band 3	750	85.23%	130	14.77%	686	84.28%↓	128	15.72%↑
Band 4	505	89.38%	60	10.62%	516	88.81%↓	65	9.54%↑
Band 5	1266	85.60%	213	14.40%	1315	86.83%↓	241	15.49%↑
Band 6	1074	86.27%	171	13.73%	1117	86.19%↓	179	13.81%↑
Band 7	564	82.58%	119	17.42%	598	82.94%↑	121	16.78%
Band 8a	189	80.77%	45	19.23%	188	77.37%↓	55	22.63↑
Band 8b	86	75.44%	28	24.56%	94	78.33%↑	26	21.67%↓
Band 8c	30	71.43%	12	28.57%	28	66.67%↓	14	33.33↑
Band 8d	10	90.91%	1	9.09%	9	90%↓	1	10%↑
Band 9	9	69.23%	4	30.77%	9	56.25%↓	7	43.75%↑
Non AFC	358	40.18%	553	59.82%	433	43.96%↑	552	56.04%↓

Table 3

2024/25 Pay Quartile (All Staff)



Quartile	2024 Female	2024 Female %	2025 Female	2025 Female %	2024 Male	2024 Male %	2025 Male	2025 Male %
1	1653.00	79.55%	1624.00	78.83%	425.00	20.45%	436.00	21.17%
2	1613.00	77.59%	1573.00	76.29%	466.00	22.41%	489.00	23.71%
3	1729.00	83.41%	1765.00	85.60%	344.00	16.59%	297.00	14.40%
4	1434.00	68.78%	1388.00	67.28%	651.00	31.22%	675.00	32.72%

## Male dominance in senior/specialist Roles:

- **Band 9 (Highest AfC Band):** Male percentage is over 40% (43.75% in 2025), significantly higher than in the mid-bands.
- **Non-AfC Roles:** These roles (often including medical consultants and very senior managers) are heavily male dominated, with men representing **56.04%** in 2025. This structural imbalance in the highest-paying roles is the primary cause of the overall gender pay gap.

## Trend Analysis (2024 to 2025)

Band	Female % Change (2024 → 2025)	Male % Change (2024 → 2025)	Interpretation of Trend
<b>Bands 2, 5, 6, 7</b>	Decrease	Increase	<b>Increasing Balance:</b> The shift is positive, with a slight increase in the male percentage and a corresponding decrease in the female percentage.
<b>Bands 3, 4, 8a, 8b</b>	Increase	Decrease	<b>Decreasing Balance:</b> The female percentage increased, and the male percentage decreased, further cementing the female dominance in these bands.
<b>Band 9</b>	Decrease	Increase	<b>Notable Shift:</b> The female percentage dropped from 69.23% to 56.25%, while the male percentage jumped from 30.77% to 43.75%. This is the largest shift towards male representation in the highest AfC band.
<b>Non-AfC</b>	Increase	Decrease	<b>Positive Shift:</b> While still majority male, the female percentage increased from 40.18% to 43.96%, and the male percentage decreased from 59.82% to 56.04%, indicating some progress toward gender balance in the most senior roles.

## Bonus Payments

The bonus payments referred to in this section relate exclusively to doctors. The contractual entitlement to access an annual award round ceased on 1 April 2024 in England, although recipients of pre-2018 awards will continue to receive them and their value is frozen (Table 4).

**Table 4 Local clinical excellence awards pre-2018**

Award level for pre-2018 LCEA holders	Value (£)
1	3,016
2	6,032
3	9,048
4	12,064
5	15,080
6	18,096
7	24,128
8	30,160
9	36,192

The pot for the pre-2018 local clinical excellence awards scheme (LCEA), introduced in 2004, was worth more than £400 million, and awards granted were consolidated and pensionable.

Between 2018 and 2023, consultants were eligible for another scheme of local awards, although these were non-consolidated, non-pensionable and time limited. As part of the consultant contract terms and conditions, a minimum amount of money per consultant needed to be made available as a multiplier per eligible Consultant. These funds were shared out pro-rata with all eligible Consultants capped at 1.0 WTE. These awards ceased in 2024 as part of the Consultant pay reform which meant that Local Clinical Excellence Award funds were consolidated and redeployed into the remuneration for new consultant pay scales.

Table 5 displays the mean bonus pay gap as 42.64%. This disparity is primarily due to the underrepresentation of female consultants in receipt of the pre 2018 CEAs. Additionally, the mean bonus pay gap is skewed by the disproportionate number of male consultants receiving these higher-level pre 2018 CEAs detailed in table 6. The mean bonus pay gap is further skewed by the disproportionate number of male consultants receiving these higher-level pre-2018 CEAs (Levels 7, 8, and 9). As shown in Table 4, the highest award is over £36,000, which is 12 times the lowest award. If the highest awards are predominantly held by men, the mean pay gap will be dramatically amplified. Only 2% of the pre 2018 awards at level 5-9 were awarded to women in the Trust.

Table 5

**Average Bonus Pay  
(all staff)**

	2021	2022	2023	2024	2025
<b>Male</b>	£11,594.26	£11,871.78	£11,999.51	£11,614.19	£11,449.03
<b>Female</b>	£7,347.09	£7,650.42	£6,612.43	£6,567.90	£6,566.68
<b>£ Difference</b>	£4,246.91	£4,220.58	£5,387.08	£5,046.29	£4,882.35
<b>Percentage Variance / Pay Gap %</b>	36.6%	35.56%	44.89%	43.45%	42.64% ↓

Table 6

**2023/24 Bonus Data**

	2023			2024			2025		
	Employees Paid Bonus	Total Relevant Employees	Percentage %	Employees Paid Bonus	Total Relevant Employees	Percentage %	Employees Paid Bonus	Total Relevant Employees	Percentage %
<b>Female</b>	32	6927	0.46%	26	7299	0.36% ↓	25	7187	0.35% ↓
<b>Male</b>	78	1894	4.12%	71	2177	3.26% ↓	67	2204	3.04% ↓

The Trust acknowledges that presenting the bonus pay gap across the whole staff group (as in Table 5) dilutes the real evidence of the gender pay gap by including a staff M:F ratio that is skewed. The true driver is the historical distribution of the consolidated, high-value CEAs among the consultant workforce, which heavily favours male doctors, particularly at the highest levels.

Since there is no longer an award round for bonus payments in England, there is no opportunity for the Trust to close this gap through new awards. The gap will only reduce over time as the long-serving consultants who hold these pre-2018 CEAs retire or leave the Trust.

[Consultant doctors and dentists pay progression system guidance | NHS Employers.](#)

## **Conclusion**

The Trust's gender pay gap profile is improving for most staff groups, with median gap halving since 2024. The remaining mean gap reflects occupational segregation rather than pay inequity. The significant reduction in the median gender pay gap demonstrates active, measurable progress. Suggesting that the Trust is successfully addressing pay inequality for the "typical" or "middle-earning employee". Further inferring that women and men in equivalent or comparable work are being paid more equally. The median is less affected by a few very high or very low salaries (unlike the mean). Therefore, a strong reduction in the median gap is robust evidence that the pay structure for most employees has become fairer.

The organisation exhibits a significant gender pay gap of 20.77% based on average hourly rates. This gap is primarily driven not by unequal pay for the median worker, but by under-representation of females in the highest-paid roles and a corresponding over-representation of males in those same roles. When medical and dental staff are excluded from the calculations, a pay gap of 6.13% in favour of females is observed.

Our annual staff survey for the corresponding year, which asks "I am satisfied with my level of pay," has shown that 30.9% (3113 surveyed) of women are satisfied or very satisfied with their pay versus males (746 surveyed) at 34.8%. This has seen a decrease from 35.2% in 2023/4 staff survey. Our comparator scores for other acute and acute community trusts were 30.4% for the 2024/5 year suggesting Shrewsbury and Telford NHS Hospital Trust colleagues are more satisfied than their peers in comparable organisations.

## **Reducing the Gender Pay Gap at The Shrewsbury and Telford NHS Trust**

The gender pay gap, is a persistent issue in many workplaces and here at The Shrewsbury and Telford NHS Hospital Trust, we are committed to closing that gap. We are proud to advance our initiatives in leadership development, promoting and shaping training and development opportunities and apprenticeship programs. This has been achieved by collaborating with our staff networks, EDI steering groups, and ICS to ensure an equitable and inclusive workplace.

Our strategy for tackling our pay gap connects within pillar two of our People Strategy "Belonging in the NHS". Progress will be governed and monitored under High Impact Action 3 (Eliminate total pay gaps with respect to race, disability, and

gender) of the NHS six high impact actions improvement tool for Equality Diversity and Inclusion.

### **Actions for 2025-2026**

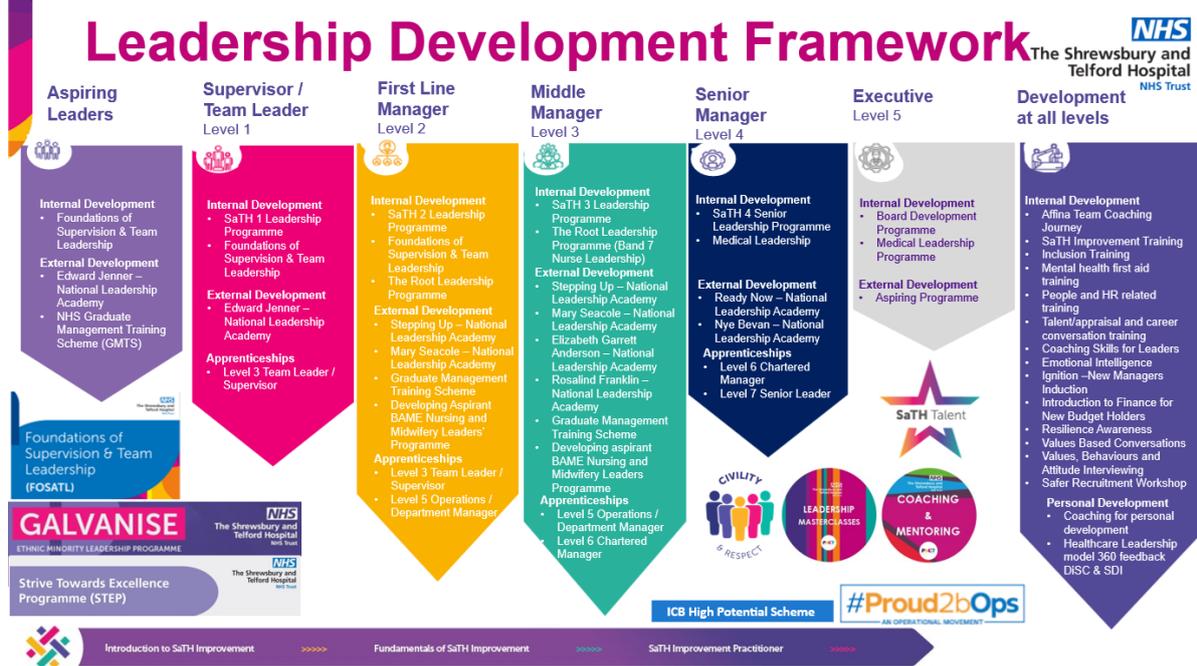
Many of the impacts to address the gender pay gap are longer term initiatives and these will include:

- **Retention and promotion of women** into Bands 8c, 8d, and 9
- **Increasing female representation** in the Medical and Dental higher pay quartiles. Currently a project is underway to seek to understand barriers to construct a robust long term action plan to rectify this.
- **Recruiting males** into the lower and mid-bands (Bands 2-7) to better balance the general workforce and reduce the overall gender concentration.

### **Developing our people**

Providing a comprehensive suite of leadership development opportunities (Figure 1), accessible to all colleagues, is fundamental in addressing any pay gap. At SaTH, we believe we have achieved this through our various offerings. Our non-medical leadership development programs have seen 380 participants since January 2023, of whom 312 were female (89%). Additionally, our Medical Leadership Development Training, introduced in 2022, has been offered to all medical leaders in post, with 100 completing the training, including 40 females (40%). This proportion aligns with the number of female senior medical staff within the organisation. To further support our colleagues' development, we offer a dedicated career portal, coaching and mentoring services, and apprenticeship schemes. Since 2018, 154 females and 20 males have accessed formal coaching and mentoring. In 2024-5, of the 219 colleagues who joined or were on our apprenticeship schemes, 177 were female (80.8%).

Figure 1



## Our Commitment to Fair Recruitment and Transparent Pay

We are committed to building an inclusive environment by promoting equitable opportunities for all staff and maintaining robust pay transparency. To foster an inclusive workplace, we continuously deliver "Safer Recruitment" training to address unconscious bias and embed inclusive practices in our hiring. This has recently been reviewed and updated in conjunction with network representatives. We have also achieved our Disability Confident Leader status in 2025 by making significant accessibility adjustments. We continue to provide assistive software (e.g., Dragon Naturally Speaking, Caption ED) and supporting staff and managers through the Staff Health Passport and the Sunflower Scheme. Furthermore, we have streamlined our workplace adjustment process with clear management guidance. Through partnerships like DFN Project SEARCH\*, we ensure valuable opportunities by offering supported internships and training for young adults with learning disabilities or autism.

Regarding pay equity and competitiveness, we minimise the risk of pay bias by using the nationally agreed job evaluation scheme, which ensures equal pay for work of equal value. Our reliance on Agenda for Change pay scales keeps us competitive and allows managers to appropriately compensate new hires based on experience. This approach is reflected in our hiring data: out of 483 new hires (Bands 3–9), 111 (22.98%) were placed at the top of their band's pay scale. Importantly, 82% (91) of those highly compensated new hires were female, demonstrating a successful, experience-based approach to female remuneration. In the most senior groups (Bands 8b–9), four of 13 new hires received top-of-band pay, with an equal split between two men and two women. Furthermore our hiring data for medical and dental colleagues 2024-5 demonstrates that from shortlisting to appointment we hired more women than men.

*\*DFN Project SEARCH is a transition-to-work program for young adults with a learning disability or autism spectrum conditions, or both.*

## Enabling a flexible working mindset

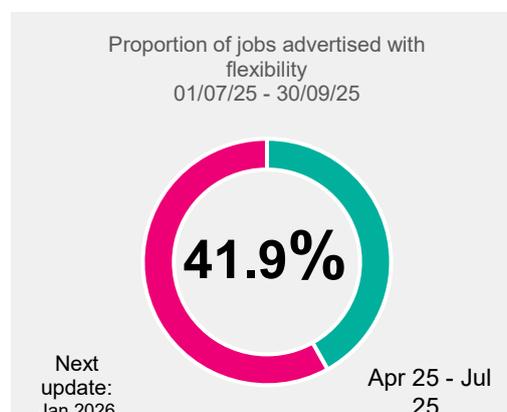
Encouraging and supporting colleagues to work more flexibly at all levels within our organisation can help reduce the Gender Pay Gap. By offering more options that empower staff members to have a greater say in where, when, and how they work, we can create more job and career opportunities, attract high-quality candidates, and retain a diverse workforce. Flexible working also contributes to enhanced work-life balance and overall well-being, reducing stress and absenteeism.

To support SaTH staff and managers in embracing flexible working, the Flexible Working Group continues to promote flexible working through the Flexible Working Masterclasses and Toolkit Briefings for both staff and line managers. These initiatives share the benefits of flexible working, provide success stories, and encourage creative thinking to identify practical options where possible. The Flexible Working Masterclass is now included as part of the Strive Towards Excellence Programme (STEP) for new managers to encourage more managers to see the benefits of working flexibly within their teams.

Our 2024 Staff Survey results saw improvements in the NHS People Promise element, We work Flexibly. The score (6.26) has continued to increase since 2021 (5.57) and is now above average for our sector of Acute and Acute & Community Trusts (6.24). As with 2023, the Staff Survey results demonstrated a strong correlation between increased flexibility and improved employee outcomes. Clinical areas that significantly increased their scores in the NHS People Promise element “We work flexibly” also experienced improvements in morale, engagement, and turnover.

SaTH developed a Flexible working dashboard to support the identification of areas that would benefit from focussed intervention. SaTH has seen an increase in the number of vacancies that are advertised with flexibility in the 2<sup>nd</sup> quarter. Between July – September 2025 41.9% of vacancies were advertised flexibly (Figure 2). Information on recruiting flexibly has been included in our flexible working masterclass, this is an improvement from the previous quarter (37.5%), however more work is needed to encourage more recruiting managers to recruit flexibly.

Figure 2



## **Empowering Staff Networks and External Learning**

Staff networks play a vital and strategic role in enhancing our culture of inclusivity, promoting a positive working environment, and ensuring staff feel empowered to bring their authentic selves to work. Our Trust is fortunate to have a range of dynamic networks, including the Race Equality Network, PRIDE Network (LGBTQIA+), Disability and Long-Term Health Conditions Forum, DAWN, and our Multi-Faith and Belief Network. All networks have executive sponsorship and are chaired by a mix of both male and female colleagues, providing valuable platforms for community building, engagement, and direct influence on decision-making.

In addition to internal initiatives, we actively engage across our Integrated Care System (ICS) and outside our region. This external collaboration allows us to share learning and benchmark our success against peers, furthering our progress toward making the Trust an excellent place for both staff and patients.

Through the collective implementation of these strategies—focused on recruitment, pay equity, and culture—The Shrewsbury and Telford Hospital NHS Trust is positioned to significantly reduce the gender pay gap, foster a more equitable workplace, and successfully promote gender equality across the organisation